

# Discussing Health Disinformation: Politicizing Pestilence

*Discutindo a Desinformação em Saúde:  
Politizando a Pestilência*

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## Resumo

A Pandemia de Covid-19 refrescou a memória coletiva da Sociedade Global quanto à vitalidade da Segurança Humana para o seu funcionamento. No entanto, abriu também um nicho de ação para Poderes determinados à sabotagem e subversão dos seus rivais. Ao gerir a morte e a doença, muitas são as sensibilidades históricas que vêm ao de cima — tornando-se alvos fáceis à Desinformação. Ao examinar material referente à evolução das perceções sociais da imunização no ocidente, podemos apontar três sensibilidades intrínsecas no processo de resposta a pandemias ocidentais: o Excepcionalismo Institucional; a Facilitação da Discriminação; e a Ansiedade Parental. Ao focar estas categorias um ator malicioso pode agir de forma a incrementar a instabilidade dentro do seu alvo — facilitando a sua derrota. Este tipo de problemáticas — já discutido por Foucault nos seus ensaios sobre Biopolítica — incidem sobre as nossas ansiedades biológicas, que tão facilmente vertem para o domínio da Sociedade Civil. Dinâmicas também exploradas por Aaltola, que sublinha o papel das crises de saúde no sequestro da normalidade nos procedimentos de governo, conduzindo a comportamentos perigosamente ritualísticos.

**Palavras-chave:** biopoder; desinformação; *immunization-hesitancy*; *misinformation*; *political-somatic*; *PsyOps*

## Abstract

The COVID Pandemic refreshed the Global Society's collective memory of just how vital Human Security is to its inner workings. However, it also opened a niche of action for Powers bent on sabotaging and domineering their rivals. In managing death and disease many hard to shed historical sensibilities come to light, making them into prime targets for Disinformation. By cross-referencing material on the evolution of the social perception of immunization we can pinpoint three specific fragilities in Western consciousness towards Pandemic Responses: Institutional Exceptionalism; Discrimination Enablement; and Parental Protectiveness. By focusing the aforementioned categories, a malicious actor can increase the unease within its target, revitalizing an ongoing Health Crisis and ultimately facilitate its subversion. Admittedly, the political roots of issues such as these has long since been reflected upon by Foucault in his essays on Biopolitics. These anxieties — spurred by our inherently Biological selves — are intrinsic, thus easily spilling into the domain of Civil Society and of its administration. Aaltola later expanded on the unseen political power of Pandemics and how it facilitates the hijacking of State Governance into predatory ritualistic behaviours.

**Keywords:** biopower; disinformation; immunization-hesitancy; misinformation; *politiso-matic*; *PsyOps*

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## 1. Introduction

Managing Disasters is often times a trying and difficult experience for most Institutions. It is for this same reason that Disasters also allow for crucial strategic windows of opportunity, even if they promise a full scale assault on the longevity and quality of Human Life. After all, if the danger is Global, then one actor's downfall might prove favourable to another, regardless of possible negative consequences.

Disasters are not limited by the endemic constraints of the Political Community they affect. They are dynamic and vary in strength along with the multitude external conditions surrounding said community. The degree of dependency that we have for our neighbours; whether or not they are willing to help us or harm us; and whether or not they themselves have fallen victim to the growing threat — all of these factors can exacerbate or diminish the impact strength of a certain threat. Of course, there are many ways in which one can engender unease and chaos in a distressed society, though we will only be focusing one within this article — Disinformation. So long as a Disinformer achieves their goal and injects fallacious data in a way that acts upon the pre-existing biases of their target audience, their job is done. Well-meaning groups have — though often unknowingly — provided unwarranted attention to damaging information, vastly increasing its reach. Disinformation is not only dangerous insofar as it exists as an expression of Sharp Power exerted on an unsuspecting target, but because it can become fully autonomous within the vast expanses of Social Media, News Cycles, pundits and everyday interactions.

For the purposes of furthering this discussion, it is necessary to establish that Disinformation and Misinformation are two very different things, although the former often passes by undetected as the latter. The most relevant distinction lies in the

fact that Disinformation implies malicious intent, unlike the Misinformation — after all, one can spread false information without being aware of it. Russian and Chinese PsyOps, for instance, are outstanding examples of this phenomena. Both having led campaigns focused on the denigration of Western Health Institutions throughout the onset of the COVID crisis (Miller, 2021; Gordon & Volz, 2021; Hui, 2021). These attacks are nothing new, considering how they were prototyped by anti-American Cold-War propaganda (Miller, 2021; Blume, 2021). However, the modern reach of these operations has since eclipsed their original iterations, either through their open reproduction through ill-informed government officials or disembodied media instruments — like bots or trolls (BBC, 2018). Having set these foundations I now reach my starting question: Through what mechanisms and how does Public Health Disinformation impact Crisis Governance? This essay will endeavour to demonstrate, in a Qualitative capacity, the values, opinions, means and behaviours that allow disinformants to unsettle political institutions. For the purpose of reaching this goal, the essay will exclusively focus the broader context of Public Health, with a particular interest in the current COVID-19 Pandemic. For this purpose, this article will explore: How Health is interlocked with Politics; why perceptions of Public Health Institutions affect these relationships; a brief analysis on the efficacy of Disinformation in the increase of Measles outbreaks; and finally, a reflection on the magnitude of the threat posed by Health disinformation.

As Western elites incorporated Biopower into their governance strategies, they simultaneously exposed themselves to Political Anxieties based on very real — rather, very physical — Human preoccupations. As these preoccupations become grounds for Incumbents to draft their policies, so too did their communities become targets for malicious intent. This essay argues that health disinformation flourishes by inverting the same Biopolitical relationships that have allowed Institutions to regulate their Politics until now, providing a meaningful means of subversion against foreign adversaries.

## 2. Theoretical Framework

Biopower provides essential framing to this discussion, as it allows us to make the leap from biological concerns into the realm of politics. This term finds its origins with Michel Foucault, as he pondered on the integration of the biological aspect of the self into political agendas following the XVIII century (Foucault, 2009, p. 107).

This allows for an interpretative lens of Western Political developments (Foucault, 2009, pp. 35-36), encapsulating how political elites recognized Human biological anxieties and allowed them to transcend into political ideology (Foucault, 2009, p. 35). Politics became able to extend beyond the realm of the politico-economic fiction — which they construe as real — and hijack real, physical worries, launching them into the realm of public opinion (Foucault, 2008, pp. 36-37; 2009, p. 107). It is this specific arrangement of governance that we dub as Biopolitics.

### 3. The Politicization of Health

We can trace back the de facto politicization of Health to the turn of the XVIII century with Edward Jenner's introduction and development of vaccine technology. These led to the genesis of the first Institutions focused on the promotion of public health, such as London's National Vaccine Establishment in 1808, Paris' *Institut Pasteur* in 1888 and Berlin's *Institut für Infektionskrankheiten* in 1891 (Blume, 2021, pp. 32-45).

These Institutions, largely financed through their States or by the private citizen contributors, became the cornerstones for how immunization — and the politics of health — are perceived today (Blume, 2021, p. 45). Even with the establishment of these Institutions, most of the diseases that ravaged societies up until the XIX century were hard to distinguish — an unfortunate side effect of the dejected living conditions that most populations were subject to. From deteriorated housing, to poor hygiene and hunger, detecting and preventing disease was an arduous task (Blume, 2021, p. 40). As such, vaccines — specifically compulsory measures for their administration — were mostly met with rejection, even if these meant to ameliorate the masses' abject living conditions. The reasoning for this lied in how disenfranchised communities saw these compulsory measures as a restriction of their already dwindling social liberties by an untrustworthy political elite (Blume, 2021, pp. 34-35).

As compulsory policies changed to accommodate for popular distrust, immunization was normalized and rival institutions which promoted reluctance faded away. This change paved the way for the commodification of Health, shifting control of Public Health away from States and into the hands of multilateral cooperation structures and multinational companies. However, this only served to globalize what once were issues confined to the bounds of the Nation State (Blume, 2021).

Blume highlights the failure of WHO's SAGE (Strategic Advisory Group of Experts) in the context of 2009's H1N1 pandemic as one of the major demonstrations of this (Blume, 2021). SAGE had not only failed to accurately predict the impact of the pandemic, but it also left many European Countries with millions of euros in wasted stockpiles of vaccine dosages. Consequently, this had led to a dwindling supply of vaccines, which had countries with weaker currencies (like many African and Southeast Asian countries) struggling to acquire the necessary dosages, leaving them wholly unprotected. SAGE's failure had created societies so ravaged by the pandemic that even gifting out vaccine dosages would have done nothing to alleviate the disastrous consequences they had already suffered through (Blume, 2021, pp. 125-126).

Committees of enquiry were appointed to investigate decision-making at the WHO and national levels... When it finally became known that many of the most influential advisers... were paid consultants to the vaccine industry, many commentators were appalled. Whose interests had they been serving? Wasn't this a clear case of conflict of interests? (Blume, 2021, p. 126)

The Politicization of Public Health as a phenomenon is a product of the genesis of immunization technologies as well as of the Institutions built to maintain, regulate

and administer them. As such, when we speak about the anxieties felt along the political plain as it concerns to matters of Public Health, we are directly addressing the centuries of poorly handled policies and global scandal that those same institutions built into the societies they are a part of.

### 3.1 *The Somatics of Fear*

As the discussion of Health Politics progresses we must take caution to address the exact mechanisms that allow what are — essentially — biological concerns to cross into the domain of the Political. These processes have deeply sentimental and cultural roots, capable of imprinting upon Institutions and Society alike.

With the coming of the XVIII century, Political Powers throughout the Western World began to expand how they thought about their peoples. As argued by Foucault, national perceptions of the Population grew to integrate the notion of the Public — people were no longer just living beings with material necessities, they became individuals capable of expressing political affiliations and acting upon them (Foucault, 2008; 2009, p. 107). Henceforth, governments had become cognizant of the somatic needs of their peoples, assimilating tribal behaviours into how they managed epidemics. Power dynamics within the State were tainted by biological anxieties and so too became the relationships between States. A behavioural pattern Aaltola christened *Politisomatics* (Aaltola, 2012).

To borrow from Aaltola's own words,

Politico-somatic relationships interlink the global hierarchy's differential spread of risk — the inequalities in the disease burden together with associated imbalances of wealth and power — with individuals' fears of bodily harm... the world order translates into a configuration of differentially exposed bodies, which, in turn, causes stress and anxiety... and other types of disease-related ritualistic behaviour (Aaltola, 2012, pp. 1-2).

*Politisomatics* configures — in essence — the translation of biological fears into political action as the fear of potential political pain becomes somatized, similarly to psychosomatic or socio-somatic disorders (Aaltola, 2012).

As in many other aspects of social life within a Polity, the preferences held and actions taken by the Public are subject to cultural institutions. For example — through this lens — we can understand neo-conservative answers to the 1980s' AIDs epidemic as a product of the conflation between anxieties over severe bodily harm (i.e. immunodeficiency) and the socio-political fear of the normalization of homosexuality (even if the contagion's spread is not necessarily linked with the aforementioned practice). Arguably, the most dangerous aspect of pandemic scares is how they can become self-validating. As danger becomes evident, so too do preventive measures and these — in turn — amplify the idea of the threat (Aaltola, 2012, p.2; p. 18).

Now that we have demonstrated how the domains of Public Health and Political action are closely interlinked, the means through which it can be subverted become clear.

#### 4. The Frailty of Public Perceptions

Natural disasters are endowed with a certain set of characteristics that make them into particularly terrorising menaces. Perhaps the most relevant of which is how they are depersonalized threats — forces of nature, not inherently associable to any one actor.

While this might serve to draw attention to the sometimes bleak prospects of facing the forces of nature, it can present an opportunity to politically-savvy subversive forces. To Actors like the USA, China and Russia (or even Actors within these Countries), the COVID-19 outbreak served as a convenient pretext to present the public with politically convenient scapegoats (Coombes et al, 2020). As we uncover why actors resort to the intentional spread of false information, we need to understand that this falls into a specific set of tactics within the scope of their foreign policies. Disinformation can be seen as an expression of *Sharp Power* — the coercive use of information (Nye, 2019). It is not the intentional spread of misinformation for the sake of the act itself, but often for the implicit purpose of subverting one's opponents. None too different from a *PsyOp*:

[O]perations planned to convey selected information and indicators to foreign audiences to influence their emotions, motives, objective reasoning and, ultimately, the behaviour of foreign governments, organizations, groups, and individuals (Department of Defence, 1996, p. 1).

In fact, it should be noted that usurping Health Crisis narratives for the purposes of subverting international public opinion is a fairly common practice, even from an historical point of view. With examples such as the Soviet Union making use of the HIV pandemic as a means to denigrate Western Society at the height of the Cold War — by enforcing a link between the virus and the 'hedonistic' nature of American Capitalism (Miller, 2021).

##### 4.1 The Sources of Immunization Hesitancy

We previously established that Immunization reluctance has substantial historical grounding in the West, mostly resulting from Government mandated compulsion to comply with immunization campaigns. However as time went on new traumas developed and with them, new fears and anxieties. There exist three which are particularly relevant, as they seem to be those most commonly appealed to by those driving narratives of reluctance towards Public Health measures.

###### 4.1.1 Institutional Exceptionalism

The first in our triad of cultural traumas is what I have dubbed Institutional Exceptionalism. More specifically, how Disinformation corrodes public confidence in the institutions commonly regarded as being superior or more efficient than their foreign counterparts.

Conis argues that as quality of life became more interlinked with National Institutions, Health was progressively transformed into a matter of National Security

(Conis, 2015). For instance, during the height of the Cold War, US Public Health and immunization became a symbol of superiority over the Soviet menace (Conis, 2015, p. 28). Lincoln highlights how countries like the US, UK and Brazil — whom largely demeaned the danger of the pandemic as it first struck — were ultimately amongst the hardest hit (Lincoln, 2020). These impenetrable institutions, liable for the securing of national Health, become hampered by national rhetoric fuelled by misinformation. The hubris of unfounded trust in the State's Institutions paved the way for future unwarranted distrust in the Institutions that mattered the most, further hampering the State's capacity to contain disaster.

No better example exists of this than the situation of how Russia's active attempt to peddle Sputnik V's efficacy over the West has left the country in a severe vaccine shortage. An effort which led to growing National distrust on its institutions as well as the severely low vaccination rate of 18% as of August 2021 (Stronski & Kier, 2021). To further add to this, a recent study on how the UK, Australia and New-Zealand structured their responses to the COVID-19 outbreak found that these countries mostly trusted in their Institutional structure to hamper the spread of the contagion (Kirk & McDonald, 2021). UN data on 28 countries suggests that after an initial trend of positive growth in Institutional Trust during the first half of 2020, we are now seeing an inversion of that trend back to pre-pandemic levels (UN, 2021).

#### 4.1.2 Discrimination Enablement

The second member is dubbed Discrimination Enablement, and it refers to how Governments and the policies they implement have shown a tendency towards disproportionately hitting weaker socio-economic groups.

[C]ampaigns against polio and measles took place in the context of a national war on poverty, widespread anxiety over the decline of American cities, and the civil rights movement; worries about poverty, urban transformation, and race were thus subtly inscribed upon the nation's efforts to immunize against these infections (Conis, 2015, p. 40).

From HIV, to Measles, Hepatitis and Poliomyelitis there is no shortage of examples of how these immunization efforts were transformed into heavily discriminatory campaigns (Blume, 2021; Conis, 2015). For instance, the HIV Pandemic was heavily construed as a disease of sexual deviants — derogatorily referred to as *the gay plague* or *Gay-related Immune Deficiency* (Pinto, 2020, p. 239) — and of the poor African migrant — as a majority of HIV cases are registered in Africa (Pinto, 2020, p. 239-245).

'When the tabloids scream about the gay plague', there was no doubt about who was to be held responsible for people's fear: a message forcefully exploited by the tabloid press. (Blume, 2021, pp. 34-35).

#### 4.1.3 Parental Protectiveness

Finally, perhaps the one most present in our collective image of anti-vaccine rhetoric is Parental Protectiveness:



[A]s divorce and non-traditional living arrangements became increasingly common, the bond between parent and child came to exceed the bond between spouses in emotional importance. Spouses, that is, came and went, but children... last a lifetime (Conis, 2015, pp. 198-199).

Essentially, we are referring to how the shifting dynamics of the family unit have led to an increase in the relative value of the child. This value is then aggravated as a consequence of the vast gaps in understanding and base line knowledge that exist between medical experts and the public. By acting as a mediator between these positions, mass media outlets produce a series of false equivalences between obviously distinct levels of interpretation of real-life phenomenon (Conis, 2015, p. 204). For instance, the media elevated Andrew Wakefield's studies linking MMR Vaccination (Mumps, Measles and Rubella) to the development of Autism in Children to the mainstream Scientific understanding of the side-effects of vaccination — even despite Wakefield's study having been thoroughly discredited by the Scientific Community at large (Conis, 2015, pp. 208-209). In turn maintaining a public debate wherein worried parents were confronted by seemingly uninterested experts, apathetic to their fears that their children might come to contract Autism (Conis, 2015).

## 5. Measles – A Proof of Concept

If there is a clear link between Politics and the Safeguarding of Health and that relationship can be manipulated to produce negative effects, how can we ascertain its risk? What are the measurable outcomes of Health Disinformation and why should we be preoccupied with them despite our surplus of immunization technologies?

As previously mentioned, HIV had been used by the USSR to attempt to garner cultural leverage against their Liberal counterpart. However, as we all know, the USSR no longer exists, so whatever gains were found in their endeavours to blame HIV on the Western way of living were of little to no use in the end. However, the geopolitical successor to the Soviet Union — the Russian Federation — has clearly seen potential in the strategic exploitation of Health Crises. Something I will be further elaborating upon as I explore the ominous precedent set by the manipulation of information surrounding European efforts to contain Measles outbreaks.

Broniatowski et al, in their study spanning from 2014 to 2017, observed a digital influx of Russian bots, Malware and Trolls with the sole purpose of eroding public consensus on vaccination (Broniatowski et al., 2018). Efforts which the BBC reported to have led to a tangible increase in Measles cases during the first half of 2018 (around 41000) as well as a revitalization of anti-vaccination movements throughout Europe (BBC, 2018). It should be noted that there are other factors that contribute to the revitalization of the Measles outbreaks. However, none of these can account for the full scope the cases. As Leah Selim points out in their article discussing the 200% increase in Measles cases between 2018 and 2019, measles has no animal reservoir, meaning that all of the outbreaks we observe are androgenic in nature (Selim, 2019). Even if we were to fully attribute the outbreaks to migrations — as documented cases



of migrant carriers from measles-endemic countries exist — vaccine hesitancy still remains the biggest threat to its eradication on a Global level (Wilder-Smith, 2021).

There is one key takeaway from these studies which is extremely relevant to the current state of affairs. It is that one of the most impacted countries in Europe is Ukraine (Selim, 2019; BBC, 2018; The Lancet, 2018). A fact that would have been nearly irrelevant if not for the obvious geopolitical fixation that Russia has on that region. In fact, by September 2018 Ukraine represented more than half of all the Measles cases in Europe — specifically 23000 cases (The Lancet, 2018).

Measles disinformation led to a degradation of confidence in institutions and in authorities. It weakened States by forcing unnecessary strain on healthcare systems and, ultimately, the threat of an increase in mortality rates. Health Disinformation might have not helped the Soviet Union outlast the West, but the potential of the tactic was not lost with its dismantlement. Policy Makers and Statesmen shouldn't just fear the threat of violence from an opposing force. They should fear the creeping threat of paranoia inducing propaganda aiming to tip the scales of victory from within.

## 6. Understanding COVID-19

Consider the efficacy of the Disinformation efforts in boosting the spread of Measles throughout Europe. How it can focus points of Geostrategic interest and raise alarm with national authorities. Then, take a moment to imagine just how great an impact it could make with a pathogen far more problematic than Measles.

The current pandemic context is of central importance for this observation. As Annelies Wilder-Smith — researcher for the London School of Hygiene and Tropical Medicine — puts it:

COVID-19 is the worst pandemic in scale and speed of this century associated with the highest number of global deaths, with most of the deaths reported in high income countries. Risk factors such as increasing age, obesity, and comorbidities including pulmonary diseases, diabetes, cancer and neurological diseases drive the infection fatality rate. (Wilder-Smith, 2021)

Even considering a far lower fatality rate than diseases like Ebola, the Coronavirus' greater reproduction capability and its rapid spread through air-travel has made the infection into a relentless threat. A situation that is all but exacerbated by the *immunological naïveté* of global populations (Wilder-Smith, 2021).

This *naïveté* that Wilder-Smith mentions is echoed by Stuart Blume's analysis of the post-COVID 21<sup>st</sup> century panorama. As Blume (2021) argues, the modern reliance on immunization technologies as a means to halt the spread of dangerous infections obfuscated older practices that were once common place in day-to-day outbreak prevention — especially amongst developed countries. In turn, this attitude fostered resentment and resistance to practices of social distancing, disinfection, quarantine and the usage of masks, which are — and always have been — essential to controlling the spread of viruses and other pathogens (Blume, 2021, p. 268)

### 6.1 *Engendering Global Perceptions*

In a global and dynamic, strategic environment, it is important to capitalize on all opportunities that are presented to us. However dangerous, an opportunity never ceases to be an opportunity. As such, the COVID-19 outbreak promptly became the prime target for a Disinformation tactics from a myriad of actors.

A great example of this disinformation effort can be seen with how Russia and China have endeavoured to increase their market shares against Western Pharmaceuticals. Moscow's efforts have been made evident by their blatant promotion of Sputnik V through all available means: from Twitter bots, broadcasts through Russia Today, Embassies and even Sputnik V's own Social Media platforms (Schafer et al, 2021; Euronews, 2021). Beijing's approaches begun by benevolently donating and supplying protective equipment — so called mask diplomacy — only to quickly change its tactics (Hui, 2021), falling in line with Moscow's approach to anti-western disinformation (Gordon & Volz, 2021).

As much as they have actively messed with global public opinions against the West, both Moscow and Beijing have largely been apathetic to each other (Schafer et al., 2021). So far, their efforts have largely focused on changing perceptions of Western technologies and staunching the flow of Western vaccines into the global market — finding support in countries like Brazil, which benefited from Beijings solidarity during its *mask diplomacy* phase (Schafer et al, 2021).

Of course the West itself is not free from blame. The USA played a hefty role in the global perception of the pandemic itself, with Trump's tenure as President demonstrating a keenness on an active perpetuation of misinformation. From branding of SARS-Cov-2 as *the Chinese Virus* (Bufacchi, 2020), to the framing of Health Institutions as agents of a nefarious Liberal Agenda (Juergensmeyer, 2020) and downplaying the infection to *just a cold* (Espejo, 2020), the Trump administration made a plethora of attempts to hijack the discourse surrounding the crisis for political gain. While a discussion on the dubious effectiveness of the US's attempts to undermine their own Hegemony by diminishing liberal global institutions as a political strategy should be had, the fact remains that this political attitude played into several pre-existing biological anxieties.

The way in which these discourses produce effects in the social and political conscience of their recipients is a clear demonstration of the *politisomatic* relationships Aaltola discussed. While it might still take some time to fully measure global impact of these disinformation efforts, what we have gathered from the Measles outbreak does not paint a positive outlook for the future. Even if the reluctance we see today is built from a decade of active disinformation over other epidemics, it is clear that we will not see an increase public awareness any time soon.

### 6.2 *Enabling Subversion and Prolonging Danger*

As we have worked through the evolving dynamics of Public Health as it relates to the State and its citizens, this article hoped to demonstrate how very real Political

Consequences can arise from these issues. Public Health is not just an issue of what experts say or what Institutions dictate followed by personal choice, it is necessarily linked to the social and cultural history as well as political practices of the Polity it is referent to.

Essentially, campaigns to denigrate the image of foreign institutions cannot be reduced to internet *trolls* preying on the ingenuity of the average person. The purpose is not to argue for the existence of some underlying conspiracy, but to demonstrate a very real side to Politics and Foreign Policy that is often overlooked. It is one thing to say that Ukraine is the European country most impacted by Disinformation; it is another to state that this has come as a result of ongoing Russian interference. A circumstance obviously spurred by Russia's ongoing conflict with Ukraine (The Lancet, 2021) and an opportunity found in country's already frail Health-Care System (Lekhan et al, 2015). In this sense, the enforcement of Disinformation rhetoric is no different from the growing pressure the Kremlin is exerting on Ukrainian borders — which, as we have seen from current reports, has yet to be deescalated despite the ongoing ravages of the pandemic (Chance & Smith-Spark, 2021; Sabbagah, 2021).

There exists a deeper level to this threat. As we have shown, interference with the containment of Measles led to drastic outbreaks in Europe — despite the fact the disease is otherwise easily treatable. Disinformation has the capacity to prolong the life-time of a pandemic, forcing local health institutions into overexertion. An issue that has been recently brought to light with the COVID pandemic, as the widespread nature of the disease has led to a single minded focus in the Academic and Medical community. This, in turn, has led to a fragmentation of Health-Care systems and to the loss of focus on other prominent diseases (Galea, 2021).

In closing this discussion, the reader is urged to think critically about the information and conclusions which have been presented thus far. It is not enough to think about one's belief about Health as a matter of choice and self-determination. We must include these topics into how we conceptualize our Communities and the dangers it might be exposing itself to.

## 7. Conclusion

The politicization of Health can be traced back to the turn of the XVIII century with the genesis of the first Institutions focused on the promotion of Public Health. As Immunization was normalized within communities Health was slowly commodified, shifting control of Public Health away from States and into the hands of multilateral structures and multinational companies. A change that, ultimately, only lead to the globalization of what once were issues bound to the sphere of the Nation.

As Political Powers throughout the Western World began to expand how they thought about their peoples, national perceptions of the Population grew to integrate the notion of the Public — people were no longer just living beings with material necessities, but also individuals capable of expressing political affiliations and acting upon them. Not only were Power dynamics within the State affected by the reality

of the biological aspects of human life, but so too became the relationships between States. Since Natural disasters are inherently depersonalized threats they become easy target for the scapegoating of political adversaries — driven by the fears of bodily harm. As such, when we bear witness to the deliberate attempt of an Actor to falsely frame an issue for their own benefit we are privy to a feat of foreign policy with Subversive intent. Ukraine is not lead to a resurgence in Measles because a Kremlin officer fancied the idea, it is targeted precisely because further weakening the country is to the benefit of Russian geopolitical interests.

Health Disinformation is a slow and yet effective tool, with the best example of this being the case of Measles in Europe. There exists clear evidence that these attacks have a definitive impact in how communities perceive their Institutions and how they react to threats to their Health in the long term, leaving lasting damage within the Polity. Of course, Disinformation itself cannot take hold without something to actively appeal to, it requires a set of pre-existing preoccupations to serve as a catalyst. In looking at the literature we can discern three main cultural traumas that have allowed for false information to spread: Institutional Exceptionalism; Discrimination Enablement; and Parental Protectiveness. The first refers to how Disinformation corrodes public confidence in the institutions commonly regarded as being superior or more efficient than their foreign counterparts. The second is how Governments and the policies they implement had a tendency to disproportionately hit weaker socio-economic groups. The third to how the shifting dynamics of the family unit have led to an increase the value of children, leading to an increase in tensions between experts and worried care-takers.

This article has sought to highlight how there exists a tangible link between how we think about Public Health and the trust we place in our Institutions. Ultimately, the roots of these connections determine the fragility of our Political Structures to outside intervention.

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